ZP E	4065	
	24/108/2006	14:31
(APR)		
	plete and send	this forn
(ENTA	TRADE	

04/

ÕŽ

207-862-4681

FASSE PATENT ATTYS

PART B - FEE(S) TRANSMITTAL

nis form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

PAGE

02/08

(571) 273-2885 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEB and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. If	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	i -					mission	
	ATTORNEYS, P.A			I hereby certify that the	his Fee(s) Transmittal is bein	g deposited with the United	
P.O. BOX 726 HAMPDEN, ME 0	i			States Postal Service addressed to the Ma transmitted to the USI	rifficate of Mailing of Trains his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (571) 273-2885, on the c	above, or being facsimile date indicated below.	
13/2006 DTESSEM2 0000	0030 10719379			Karin Smi		(Depositor's name)	
FC:1501 1400.00 QP		Harri		Flarin S	mith	(Signature)	
FC:1504	300.00 OP			April 12,	2006	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/719,379	11/20/2003		Hiroshi V	Uragami	4597	2559	
TITLE OF INVENTION: SEMICONDUCTOR DEVI	METHOD OF RESIN CE, SEMICONDUCTOR D	ENCAPSULATION EVICE AND RES	ON, APPAR IN MATERIA	RATUS FOR RESIN ENC AL	APSULATION, METHOD		
APPLN. TYPE	SMALL ENTITY	ISSUE F	6E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	. NO .	\$1400)	\$300	\$1700	04/20/2006	
EXAM	INER	ART UN	ПТ	CLASS-SUBCLASS] .		
KEBEDE	, BROOK	2823		438-126000		·	
1. Change of correspondence	e address or indication of "F	ee Address" (37		nting on the patent front page,	. 27	Fasse	
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (baving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents, if no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO	SE PRINTED ON	THE PATEN	T (print or type)	,		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified b n 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will app Ta substitute	pear on the patent. If an assignment.	mee is identified below, the	document has been filed for	
(A) NAME OF ASSIGN	EE	(E	•	CE: (CITY and STATE OR CO			
1) TOWA COR	RPORATION		1) Kyoto-shi, Japan				
<pre>2) FUJITSU</pre>	LIMITED		2) Kawasaki-shi, Japan				
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) are	enclosed:	41	o. Payment of				
☑ Issue Fee	•	•	673	in the amount of the fee(s) is e			
Publication Fee (No	small entity discount permit	ted)	Payment Payment	t by credit card. Form PTO-203	38 is attached. any d	eficiency in	
Advance Order - # o	fCopies <u>defici</u> e	ency: >	Mary The Dir Deposit Acc	t by credit card. Form PTO-20: ector is hereby authorized 27 count Number <u>50 - 0507</u>	charge the required tee(s), o	copy of this form).	
5. Change in Entity Status	(from status indicated abov						
	MALL ENTITY status. Sec			cant is no longer claiming SMA			
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Ist Publication Fee (if required) ords of the United States Pa	sue Fee and Publica will not be accepte tent and Trademark	ution Fee (if a d from anyon Office.	ny) or to re-apply any previou se other than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent, or	cation identified above. the assignee or other party in	
Authorized Signature	Walter-	Ttax	u_	Date	April 12, 200	6	
· -	Walter F. Fa	sse .		Registratio	n No. 36132		
	on is required by 37 CFR 1. ity is governed by 35 U.S.0 pplication form to the USP's for reducing this burden, sinia 22313-1450. DO NOT		on is required 1.14. This co depending use Chief Infor COMPLETE	to obtain or retain a benefit by billection is estimated to take 12 apon the individual case. Any mation Officer, U.S. Patent an D FORMS TO THIS ADDRE	•	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

PAGE 2/8 * RCVD AT 4/12/2006 2:25:49 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/41 * DNIS:2732885 * CSID:207 862 4681 * DURATION (mm-ss):04-08

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

APR. 12. 2006 2:22PM 20WELL, GOLDSTEIN (DTI-17)

NO. 711 P. 1

Atlanta

Washington

One Atlantic Center
Fourteenth Floor
1201 West Peachtree Street, NW
Atlanta, GA 30309-3488

Telephone: (404) 572-6600

Fax: (404) 572-6999

Internet: www.pogolaw.com

NOTICE: This communication may contain privileged or other confidential information. If you are not the intended recipient, or believe that you have received this communication in error, please do not print, copy, retransmit, disseminate, or otherwise use the information. Also, please indicate to the sender that you have received this communication in error, and delete the copy you received. Thank you.

FACSIMILE TRANSMISSION COVER SHEET

Date: April 10, 2006

To:

From:

MAIL STOP ISSUE FEE

Fax#

571-273-2885

Commissioner for Patents

Recipient's Direct Dial #

Sender's Direct Fax #

404-572-6999

Sender's e-mail address:

Kbell@pogolaw.com

Sender's Direct Dial #

404-752-4581

Our File#

141386.00004

Kathy Bell

Attorney # 0355

Total Pages (Including This Page): 3
Please notify sender at (404) 572-6600 if all pages are not received properly

COMMENTS:

Attached herewith are the following documents:

1) PTOL-85 Fee Transmittal Form (in duplicate) (2 pages)